## PART B-ISSUE FEE TRANSMITTAL

Complete and mail this form, together with app MAR 1 0 2000 &

bie fees, to:

**Box ISSUE FEE Assistant Commissioner for Patents** Washington, D.C. 20231

MAILING INSTRUCTIONS. This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

LM51/1206

KNOBBE MARTENS OLSON & BEAR 620 NEWPORT CENTER DRIVE SIXTEENTH FLOOR NEWPORT BEACH CA 92660-8016

Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

## **Certificate of Mailing**

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

(Depositor's name)

	FILING DATE		- May Seberch	(Signature)
APPLICATION NO.		TOTAL CLAIMS	March 6, 2000	(Date)
APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/942,071	10/01/97	032 NAJJ	AR, S 27	58 12/06/99
First Named NOURI,		35 USC 15	4(b) term ext. = 0	Days.

INVENTION METHOD OF DISPLAYING SYSTEM STATUS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE		
0 MNFRAME.045	6A 714-031.0	100 F27	7 UTILI	ΓY NO	\$1210.00	03/06/00		
1. Change of correspondence address Use of PTO form(s) and Customer N  Change of correspondence addre PTO/SB/122) attached.  "Fee Address" indication (or "Fee	Number are recommended, but ess (or Change of Corresponde	not required.	(1) the names of attorneys or ago the name of a member a region and the names of attorneys or age	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 KNOBBE, MARTENS,  2 OLSON & BEAR, LLP				
3. ASSIGNEE NAME AND RESIDENCE PLEASE NOTE: Unless an assigne Inclusion of assignee data is only at the PTO or is being submitted under filing an assignment.  (A) NAME OF ASSIGNEE MICE  (B) RESIDENCE: (CITY & STATE COMPLETED PLEASE Check the appropriate assigned individual Comparation of the proportion of the proportion of the properties of the proportion of the properties of the proper	ar on the patent. Isly submitted to T a substitue for	Advance Order - # of Copies  4b. The following fees or deficiency in these fees should be charged to:  DEPOSIT ACCOUNT NUMBER						
The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.								
(Authorized Signature)  Tay Saland  NOTE; The Issue Fee will not be accept	Ray Salenieks		3/6/00			1210.00 30.00		
or agent; or the assignee or other party Trademark Office.		<b>55</b>						
Burden Hour Statement: This form depending on the needs of the indiv to complete this form should be set Office, Washington, D.C. 20231. DO ADDRESS. SEND FEES AND THI Patents, Washington D.C. 20231	time required nd Trademark IMS TO THIS nmissioner for	TTRSHZ 00000124 06942071						
Under the Paperwork Reduction Act of information unless it displays a va				33/13/2000   11 FC:142 12 FC:361				
	FORM WITH FE	E		200				